DE CONTRACTOR SOLUTION SOLUTIO				FEE TRANSMITTAL FOR FY	2002	
MARK				FEE TRANSWITTAL FOR FY	2003	
_				TOTAL AMOUNT OF PAYMENT (\$)	1300.00	
Comple			00	V900 633		
Applica Filing D				0/800,633 arch 6, 2001		
		entor_		lward L. Schwartz		
Group A	rt Unit _		26	35		
Examine Attorney				<u>1known</u> 4451.P127D9		
	_					
METHO	D OF F	PAYME	NT (che	eck one)		
1. [X]			ioner is hereby authorized to charge in nents to:	dicated fees and cre	dit
		Depos	it Acco	unt Number <u>02-2666</u>		_
		Depos	it Acco	unt Name <u>Blakely, Sokoloff, Taylor</u>	& Zafman LLP	
[x]	Charge	e Any A	dditional Fee Required Under 37 CFR 1	.16 and 1.17	
]]	Applic	ant clai	ms small entity status. See 37 CFR 1.2	7	
2	<u>X</u>	Payme	nt Enci	osed: X Check Money Order Other		
FEE O		ATION	•			
FEE CA	(LCUL)	ATION				
1. <u>B</u>	ASIC F	ILING F	<u>EE</u>			
Large E	ntity	<u>Small</u>	Entity			
Fee	Fee	Fee	Fee			
Code	(\$)	Code	(\$)	Fee Description		Fee Pai
1001 1002	750 330	2001 2002	375 165	Utility application filing fee Design application filing fee		
1002	520	2002	165 260	Plant filing fee		
1004	750	2004	375	Reissue filing fee		
1005	160	2005	80	Provisional application filing fee		
					SUBTOTAL (1) \$	
2. E	XTRA	CLAIM I	FEES		Fee from	
2. <u>E</u>	XTRA	CLAIM I	FEES	Extra Claims	Fee from below	Fee Pai
		CLAIM I	FEES		<u>below</u>	
Total C	laims			- 20** =	<u>below</u>	=
Total C	laims ndent (Claims _			<u>below</u>	=
Total C Indepe Multipl	laims ndent (e Depe	Claims _.		- 20** = - 3** =	<u>below</u> X = X =	=
Total C Indepe Multipl **Or nu	laims ndent (e Depe ımber p	Claims _. ndent previous	sly paid	- 20** =	<u>below</u> X = X =	=
Total C Indepe Multipl	laims ndent (e Depe ımber p	Claims _.	sly paid	- 20** = - 3** =	<u>below</u> X = X =	=
Total C Indepe Multipl **Or nu Large E	claims ndent (e Depe imber p ntity	Claims ndent previous Small	 Sly paid	- 20** = - 3** = d, if greater; For Reissues, see below Fee Description	<u>below</u> X = X =	=
Total Clindepe Multipl **Or nu Large E Fee Code 1202	laims ndent (e Depe mber p ntity Fee (\$) 18	Claims ndent orevious Small Fee Code 2202	sly paid Entity Fee (\$)	- 20** = - 3** = d, if greater; For Reissues, see below Fee Description Claims in excess of 20	<u>below</u> X = X =	Fee Pai
Total C Indepe Multipl **Or nu Large E Fee Code 1202 1201	laims ndent (e Depe mber p ntity Fee (\$) 18 84	Claims ndent orevious Small Fee Code 2202	sly paid Entity Fee (\$) 9	- 20** = - 3** = d, if greater; For Reissues, see below Fee Description Claims in excess of 20 Independent claims in excess of 3	<u>below</u> X = X =	=
Total C Indepe Multipl **Or nu Large E Fee Code 1202 1201 1203	laims ndent (e Depe imber p ntity Fee (\$) 18 84 280	Claims ndent orevious Small Fee Code 2202 2201 2203	sly paid Entity Fee (\$) 9 42	- 20** = - 3** = d, if greater; For Reissues, see below Fee Description Claims in excess of 20 Independent claims in excess of 3 Multiple dependent claim, if not paid	<u>below</u> X = X = w.	=
Total C Indepe Multipl **Or nu Large E Fee	laims ndent (e Depe mber p ntity Fee (\$) 18 84	Claims ndent orevious Small Fee Code 2202	sly paid Entity Fee (\$) 9	- 20** = - 3** = d, if greater; For Reissues, see below Fee Description Claims in excess of 20 Independent claims in excess of 3	below = X = X = w.	=

SUBTOTAL (2) \$__ PECEIVED

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OFFICE OF PETITIONS

FEE	CALCULA	TION (co	ntinued)		
3.	ADDITION				
Large Entity Small Entity					
Fee	Fee	Fee	Fee		
Code	(\$)	Code	(\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1813	8,800	1813	8,800	Request for inter parties reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	1300.00
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per	
[property (times number of properties)	
1809	750	2809	375	For filing a submission after final rejection	
				(see 37 CFR 1.129(a))	
1814	110	2814	55	Statutory Disclaimer	
1810	750	2810	375	For each additional invention to be examined	
				(see 37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design	
				application	
1504	300	1504	300	Publication fee for early, voluntary, or normal pub.	
1505	300	1505	300	Publication fee for republication	
1803	130	1803	130	Request for voluntary publication or republication	
1808	130	1808	130	Processing fee under 37 CFR 1.17(i) (except provisionals)	
1454	1,300	1454	1,300	Acceptance of unintentionally delayed claim for priority	<i></i>
Otho.	, foo (onooid	- A			
Other	r fee (specif	у)			
				SUBTOTAL (3) \$ 1	300.00
*Redu	ced by Basic	Filing Fee	Paid	· · · -	
SUB	MITTED B	<u>Y</u> :			-
T	d or Drive	d Nome:	Minhaa	ol I Mallia	
i ype	ed or Printe	eu mame:	iviichae	el J. Mallie	
Sign	ature:		on	Date: Date:	
_		26 504		Tolonbono Number: 409 700 000	
neg.	Number:	<u>30,591</u>		Telephone Number: 408-720-830	<u> </u>

EXPRESS MAIL CERTIFICATE OF MAILING
"Express Mail" mailing label number: EV336584236US
Date of Deposit: June 25,2003
I hereby certify that I am causing this paper or fee to be deposited with the United States Postal
Service "Express Mail Post Office to Addressee" service on the date indicated above and that
this paper or fee has been addressed to Mail Stop Patent Application, Commissioner for Patents,
P.O. Box 1450, Alexandria, VA 22313-1450.
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(ACXIV 28/V) 6 04+03
Signature of Person Mailing Paper or Fee Date Signed